Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type::

Regular

Subject Matter:: Utility

Title:: ASYMMETRIC WIRELESS PROTOCOL

COMMUNICATIONS

Attorney Docket Number:: 021245-001300US

Request for Early Publication:: No Request for Non-Publication:: Yes

Suggested Drawing Figure::

Total Drawing Sheets:: 3

Small Entity?:: Yes

Petition included?::

Secrecy Order in Parent Appl.:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Vincent

Middle Name:: K.

Family Name:: Jones

Name Suffix:: IV

City of Residence:: Redwood City

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 2060 Seabrook Court

City of Mailing Address::	Redwood City
State or Province of mailing address::	CA
Country of mailing address::	US
Postal or Zip Code of mailing address::	94065
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	Partho
Middle Name::	
Family Name::	Muhra
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of Mailing Address::	
City of Mailing Address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	Greg
Middle Name::	
Family Name::	Raleigh
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	

Initial 8/18/03

Street of Mailing Address City of Mailing Address State or Province of no Country of mailing address Postal or Zip Code of	ss:: nailing address:: dress::			
Correspondence Inf	ormation			
Correspondence Cus	tomer Number:: 20350			
Representative Info	rmation			
Representative Custo	omer Number::			
Domestic Priority In	formation			
Application::	Continuity Type::	Parent Application::	Parent Filing Date::	
Foreign Priority Info	ormation			
Country::	Application numl	per:: Filing Da	ite::	
Assignee Information	on			
Assignee Name::				
Street of mailing add	ress::			
City of mailing address	SS::			
State or Province of r				
Country of mailing address::				
Postal or Zip Code of	fmailing address::			